revision effective :

SUMMARY SHEET

12/15/08

New Business

Renewal Business

02/01/09

Change in company's premium or rate level produced by rate

(1)	(2) Annual Premium	(3) Percent
Coverage 1 Automobile Liability Private Passenger	volume (Illinois)*	Change (+ or -)**
Commercial 2 Automobile Physical Damage Private Passenger		
Commercial 3 Liability Other Than Auto 4 burglary and Theft		
5 Glass 6 Fidelity 7 Surety		
8 Boiler and Machinery 9 Fire		
10 Extended Coverage 11 Inland Marine 12 Homeowners	43,511	+10.0%
13 Commercial Multi-Peril 14 Crop Hail 15 Other		
Line of Insurance	43,511	+10.0%
oes filing only apply to certain territory (territories) or certain	classes? If so, specify:	
NO rief Description of filing. (If filing follows rates of an advisory Flat base rate increase.	organization specify organization	ANVISION OF INSURANCE
The Best paint of ming. (A ming follows takes of all actions)	0.922	STATE OF LETTERS
* Adjusted to reflect all prior rate changes.		NOV 2 4 2008
** Change in Company's premium level which will result from application of new rates.	/	SPRINGFIELD, ILLINOIS
	Millers	First Insurance Company
· · · · · · · · · · · · · · · · · · ·	FEIN #	37-0420520 Name of Company
<u>2008-014-MF-HP-R</u> COMPANY TRACKING NO:	Regina	M. Wethington Filling Coordinator
		Official-Title

Schedule PROPERTY Rides Personal Inland Marine

SUMMARY SHEET

	hange in company's premium or vision effective :	rate level produc 12/15/08	ed by rate New Business	02/01/09	Renewal Business	
	(1)		(2) Annual Premium		(3) Percent	
Co	overage		volume (Illinois)*		Change (+ or -)**	
1 Au	utomobile Liability					
	ivate Passenger	_		_		
	ommercial					
	utomobile Physical Damage					
	ivate Passenger	_				
	ommercial	-				
		_				
	ability Other Than Auto	_	· - · · · · · · · · · · · · · · · · · ·			
	irglary and Theft	_				
5 GI						
	delity	_			<u> </u>	
	urety	_				
8 Bo	oiler and Machinery			_		
9 Fi		_		_		
	ktended Coverage	_		_		
	land Marine		42,625	- -	+10.0%	
	omeowners	-		-		
	ommercial Multi-Peril	_				
		_				
	rop Hail	_				
15 Ot	tner	_			· · · · · · · · · · · · · · · · · · ·	
Li	ne of Insurance	_	42,625		+10.0%	
does filing onl	y apply to certain territory (territo	ories) or certain cl	asses? If so, specify:			
No	0					
	ion of filing. (If filing follows rates	of an advisory o	rganization, specify or	ganization):		_
** Ci re	/ a_	NOV 2 4	2008 D, ILLINOIS	FEIN#: 37-11	Name of Company ethington Filing Coordinat	or

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective January 1, 2009

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or <u>-)**</u>
	1014110	
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery 9. Fire		
10. Extended Coverage		
11. Inland Marine	1,308,427	-24.1%
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain If so, specify: NO	territory (territories)or	certain classes?

Brief description of filing. (If filing follows rates of an advisory In accordance with the regulatory organization, specify organization):

provisions of your state, we hereby adopt the following ISO - Insurance Services Office, Inc. filing designation number:

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

NOV 1 8 2008

SPRINGFIELD, ILLINOIS

FILING DESIGNATION # CM-2008-RLA1

TITLE ILLINOIS REVISED COMMERCIAL INLAND MARINE ADVISORY PROSPECTIVE LOSS COSTS TO BE IMPLEMENTED

This filing is being submitted under your Use & File statute. We request that this filing be applicable to all policies effective on or after January 1, 2009.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

RAX- 125909701

INS00106

TRANSGUARD INSURANCE COMPANY OF AMERICA, INC.

Name of Company

Joyelle Endres, AIS, API, IR - Compliance Support Analyst
Official - Title

H29219D